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Jessica Pallach

Jessica Pallach

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Johnson

Docket No.: JJOH0001

Serial No. : 08/960,755

Art Unit: 2765

Filed: October 29, 1997

Examiner: H. Kazimi

Title: Method and System for Consolidating and Distributing Information
June 11, 2001

Assistant Commissioner for Patents

BOX DAC

Washington, DC 20231

TRANSMITTAL OF PETITION TO REVIVE

Dear Sir:

Enclosed for the above-referenced patent are the following:

1. Petition to Revive-Unintentional;
2. Copy of Amendment previously filed 8/2/99;
3. Copy of Extension of time filed 8/2/99;
4. Copy of Express Mail Label dated 8/2/99;
5. Copy of PTO Stamped Postcard showing receipt of response on 8/2/99;
6. Copy of letter faxed to Examiner on 6/7/01;
7. Terminal Disclaimer;
8. Associate Power of Attorney; and
9. Return Postcard

The Commissioner is authorized to charge any additional fees, or credit any overpayments, to Deposit Account No. 07-1445 (Order No. JJOH0001). A copy is enclosed for this purpose.

Respectfully submitted,

Kirk D. Wong

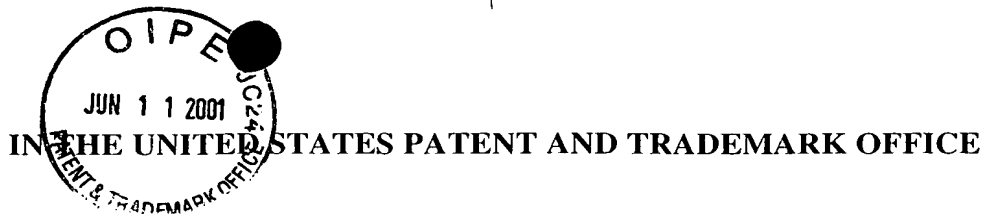
Kirk D. Wong
Reg. No. 43,284

Customer No. 22862

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JUN 15 2001

**OFFICE OF PETITIONS
DEPUTY A/C PATENTS**



In re application of:

Johnson

Serial No. 08/960,755

Filed: 10/29/97

For: Method and System for Consolidating
and Distributing Information

Group Art Unit: 2765

Examiner: H. Kazimi

**PETITION FOR REVIVAL OF AN APPLICATION FOR PATENT
ABANDONED UNINTENTIONALLY UNDER 37 CFR 1.137(b)**

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

RECEIVED

JUN 15 2001

This application became abandoned on September 27, 1999.

**OFFICE OF PETITIONS
DEPUTY A/C PATENTS**

This petition is filed:

_____ within one year of the date of abandonment.

_____ within three months of the date of the first decision on a petition to revive under 37

CFR 1.137(a) which was filed within one year of the date of abandonment.

_____ the three month period has been extended to _____.

This application became abandoned unintentionally. A Response to the Office Action dated 2/19/99

 X was filed on August 2, 1999. Proof of the Express Mail Receipt and PTO stamped postcard are attached.

_____ is attached.

The response is the filing of a continuation application having an express abandonment condition in the granting of a filing date to the continuing application copending with this application.

The application status is:

 X Small Entity -- fee \$605.00

_____ Large Entity -- fee \$1,210.00

06/14/2001 GTEFFERA 00000016 071445 08960755

01 FC:241 620.00 CH

Adjustment date: 02/06/2002
06/14/2001 GTEFFERA 00000016 071445 08960755
01 FC:241 620.00 CH

X The Commissioner is authorized to charge the petition fee totaling \$605.00 any additional fees or credit any overpayments to Deposit Account No. 07-1445 (Order No. JJOH0001). A copy of this sheet is enclosed for accounting purposes.

The Petition is filed in response to Examiner Kazimi's instructions to do so. The Examiner stated that because Applicant faxed in proof of the timely filing of the response, that both he and his supervisors have agreed to accept this petition to reinstate the above-referenced case, in view of the one-year time frame. This application went abandoned because the amendment filed 8/2/99 merely had the wrong serial number (clerical error on Applicant's part) and that by filing this petition and petition fee, the Examiner will reinstate this application. This was an unintentional error.

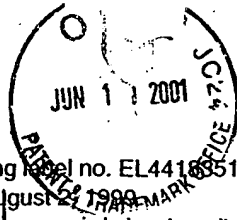
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Kirk Wong', with a long horizontal line extending to the right.

Kirk Wong
Reg. No. 43,284

Customer No. 22862



COPY

Express Mail mailing label no. EL441835164US

Date of deposit: August 27, 1999

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Vanessa Knowles
Vanessa Knowles

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: JOHNSON

Examiner: H. Kazimi

Application No.: 08/968,755

Art Unit: 2765

Filed: October 29, 1997

Atty. Docket No: JJOH0001

For: METHOD AND SYSTEM FOR
CONSOLIDATING AND
DISTRIBUTING INFORMATION

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Assistant Commissioner for Patents
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AMENDMENT

Dear Sir:

In response to the Office Action dated February 19, 1999, and in further response to the telephone interview with the Examiner on July 6, 1999, please amend the above-referenced U.S. patent application as follows:

Enclosed herein is a petition under 37 C.F.R. §1.136(a) to extend the period for response to the Office Action mailed February 19, 1999 for three months, and authorization is hereby given to charge \$435.00 under 37 C.F. R. §1.17(a)(3) to U.S. Patent Office deposit account number 07-1445.

A small entity Declaration has been previously filed for the above-referenced patent application.

In The Claims

Please cancel claims 8 – 21.

Please amend claims 1-7 and 22-32 as follows:

1. (AMENDED) An integrated health care system for collecting, consolidating, conforming, and distributing health care data concerning at least one individual service recipient, the system comprising:

at least one central host computer [system] for maintaining, consolidating, and distributing information generated by any component of said system;

wherein said centralized host computer is one of a computer, or a network of linked computers having at least one central server;

at least one [of a remote, single provider, or networked] provider terminal in communication with said central host computer; [and]

wherein said provider terminal is one of a portable computer, personal information device, personal digital assistant, personal computer, or server computer;

at least one portable individual information device for accessing said system;

wherein said portable individual information device is any of an integrated circuit card, a magnetic storage card, or a portable integrated circuit or microchip-based device;

a billing module for calculating billing information for a service provided to the at least one individual service recipient;

an insurance benefits module for calculating available insurance benefits for a service provided to the at least one individual service recipient;

a payment module for electronically transferring funds to pay a bill for services provided to the at least one individual service recipient;

an authorization module for authorizing service recipient treatment;

a messaging module for providing messaging services to a component of said system;

wherein said at least one service recipient's health care data records are stored on said central host computer, said provider terminal, and said individual information device;

wherein said central host computer, said provider terminal, and said portable individual information device are electronically linked as a network, to permit information distribution to various locations on said network[; and

wherein open standards are used for hardware, software, and firmware components of said system]

wherein said system is implemented using any of a global communications network, the Internet, or a local area network;

wherein said individual information device stores any of an individual service recipient's insurance information, emergency records, and health care history;

wherein said provider terminal includes:

a medical insurer module;

a health plan sponsor module;

an individual service recipient module;

a health care service provider module;

a health care research module; and

a service support module.

wherein said medical insurer module includes functions for plan definition, open enrollment marketing features, automated authorization of benefits, automated referrals, and service payment accounting and ;

wherein said health plan sponsor module includes functions for open enrollment processes, benefit plan information maintenance, and coordination of distribution and activation or deactivation of individual information devices;

wherein said health care service provider module includes functions for maintaining service recipient records, diagnosing and treating service recipient ailments, managing service payments , accounting services, and maintaining service

provider records, including licensing information, staffing affiliations, organizational ownership information, tax identification information, curriculum vitae of licensed practitioners, and well as information regarding disciplinary actions;

wherein said health care research module includes functions for collecting data on said system for research and analysis of health care issues;

wherein said service support module includes functions for service parameter maintenance, product support, customer requests, and system maintenance;

wherein said system provides access to Social Security, annuity, retirement account, and benefit information; and,

wherein said medical insurer module; said health plan sponsor module, said individual service recipient module, said health care service provider module, said health care research module; and said service support module each include databases for storing information; and,

wherein said information is linked and organized by at least one indexing key.

2. (AMENDED) The system of Claim 1, wherein **[said portable individual information device stores any of an individual service recipient's insurance information, emergency records, and health care history]** open standards are used for hardware, software, and firmware components of said system.

3. (AMENDED) The system of Claim 1, wherein said **[remote, single provider, or networked provider terminal comprises any of:**

a medical insurer module;

a health plan sponsor module;

a health care service provider module;

a health care research module; and

a service support module] health care research module converts said health care data on said system into one common format for use by said central host computer.

4. (AMENDED) The system of Claim 3, wherein said [medical insurer] health care research module [supports any of plan definition, open enrollment marketing features, automated authorization of benefits, automated referrals, and service payment accounting] further strips the health care data of any personal information that might compromise the anonymity of the individual service recipient from whom the health care data was collected before distributing the information to any other component of the module.
5. (AMENDED) The system of Claim 3[, wherein said health plan sponsor module supports any of open enrollment processes, maintaining benefit plan information, and coordinating distribution and deactivation of individual information devices] further including a statistical analysis module for providing statistical analysis of said common-format health care data stored in said system.
6. The system of Claim [3] 5, [wherein said health care service provider module supports any of maintaining service recipient records, diagnostic and treatment support, service payment management, accounting services, and maintaining service provider records, including licensing information, staffing affiliations, organizational ownership information, tax identification information, curriculum vitae of licensed practitioners, and well as information regarding disciplinary actions] further comprising a card reader linked to said provider terminal, for accessing information stored on said portable individual information device, and for transmitting information among said portable individual information device and any of said components of said system.
7. (AMENDED) The system of Claim [3] 6, wherein said [health care research module supports the collection of data on said system for research and analysis of health care issues] provider terminal is operable to communicate with said entire system or any portion of said system, or is operable independently from said system.

22. (AMENDED) An integrated health care system, implemented using any of a global communications network, the Internet or a local area network, the system comprising:

at least one central host computer **[system]** for collecting, conforming, maintaining, consolidating, and distributing information generated by any component of said system;

at least one **[of a remote, single provider, or networked]** provider terminal in communication with said central host computer;

wherein said provider terminal is one of a portable computer, personal information device, personal digital assistant, personal computer, or server computer; and,

[a portable terminal in communication with said central host computer,] wherein said **[portable]** provider terminal is operable to communicate with said entire system or any portion of said system, or is operable independently from said system;

at least one portable **[integrated circuit card]** individual information device for accessing said system, wherein said portable individual information device stores **[any of]** an individual service recipient's insurance information, emergency records, and health care history;

a card reader, linked to said **[remote, single provider, or networked]** provider terminal, for accessing information stored on said portable individual information device, and for transmitting information among said portable individual information device and **[any of]** said components of said system;

a messaging module for providing messaging services to **[a component]** said components of said system;

wherein said service recipient's health care data records are stored on **[any of]** said central host computer, said provider terminal, or said portable individual information device;

wherein said central host computer, said provider terminal, and said portable individual information device are electronically linked as a network, to permit information distribution to various locations on said network;

wherein open standards are used for hardware, software, and firmware components of said system;

wherein said provider terminal includes:

a medical insurer module including functions for plan definition, open enrollment marketing features, automated authorization of benefits, automated referrals, and service payment accounting;

a health plan sponsor module including functions for open enrollment processes, maintenance of benefit plan information, and coordination, distribution, and deactivation of said portable individual information devices;

a health care service provider module including functions for maintaining service recipient records, diagnosing and treating service recipient ailments, service payment management, and accounting services;

a health care research module including functions for the collection of data on said system for research and analysis of health care issues; and,

a service support module including functions for service parameter maintenance, product support, customer requests, and system maintenance.

23. (AMENDED) The system of Claim 22, wherein said [remote, single provider, or networked provider terminal comprises any of:] health care service provider module further includes

[a medical insurer module for supporting any of plan definition, open enrollment marketing features, automated authorization of benefits, automated referrals, and service payment accounting;

a health plan sponsor module, said health plan sponsor module supporting any of open enrollment processes, maintaining benefit plan information, and coordinating distribution and deactivation of individual information devices;

a health care service provider module, said health care service provider module supports any of maintaining service recipient records, diagnostic and treatment support, service payment management, accounting services, and maintaining] a function for maintenance of service provider records, including licensing information, staffing affiliations, organizational ownership information, tax identification information, curriculum vitae of licensed practitioners, and [well as] information regarding disciplinary actions against the health care service provider;

a health care research module, said health care research module supporting the collection of data on said system for research and analysis of health care issues; and

a service support module, said service support module supporting any of service parameter maintenance, product support, customer requests, and system maintenance].

24. (AMENDED) The system of Claim [22] 23, further comprising an integrated statistical analysis software [package] module [linked to said system] for providing statistical analysis of said [information] health care data stored in said system.

25. (AMENDED) The system of Claim [22] 24, further comprising a billing module for calculating billing information for a service provided to [said] the individual service recipient.

26. (AMENDED) The system of Claim [22] 25, further comprising an insurance benefits module for calculating available insurance benefits for a service provided to [said] the individual service recipient.

27. (AMENDED) The system of Claim [22] 24, further comprising a payment module for electronically transferring funds to pay a bill for services provided to said service recipient.

28. (AMENDED) The system of Claim [22] 24, further comprising an authorization module for authorizing service recipient treatment.

29. (AMENDED) The system of Claim [21] 23, wherein said centralized host computer [system] is one of a computer, or a network of linked computers having at least one central server.

30. (AMENDED) The system of Claim [22] 24, wherein said system provides access to any of Social Security, annuity, retirement account, and benefit information, and said statistical analysis module provides comparative statistical analysis of Social Security, retirement account and benefit information.

31. (AMENDED) A method for collecting, conforming and consolidating information in an integrated health care system implemented using any of a global communications network, the Internet or a local area network, the method comprising [the] steps of:

maintaining, consolidating, and distributing information generated by [any] a component of said system with at least one central host computer [system for];

providing at least one [of a remote, single provider, or networked] provider terminal in communication with [said] the central host computer;

wherein said provider terminal is one of a portable computer, personal information device, personal digital assistant, personal computer, or server computer;

[providing a portable terminal in communication with said central host computer,] wherein [said] the [portable] provider terminal is operable to communicate with [said] the entire system or any portion of [said] the system, or is operable independently from [said] the system;

providing at least one portable [integrated circuit card] individual information device for accessing [said] the system, wherein [said] the portable individual

information device stores **[any of]** an individual service recipient's insurance information, emergency records, and health care history;

linking a card reader to **[said remote, single provider, or networked]** the provider terminal, for accessing information stored on **[said]** the portable individual information device, and for transmitting information among **[said]** the portable individual information device and **[any of said]** the components of **[said]** the system;

providing messaging services to a component of **[said]** the system;

wherein **[said]** the service recipient's health care data records are stored on any of **[said]** the central host computer, **[said]** the provider terminal, or **[said]** the portable individual information device;

wherein **[said]** the central host computer, **[said]** the provider terminal, and **[said]** the portable individual information device are electronically linked as a network, to permit information distribution to various locations on said network;

wherein open standards are used for hardware, software, and firmware components of said system.

32. (AMENDED) The method of Claim 31, further comprising **[the step]** steps of:

[providing access to any of Social Security, annuity, retirement account, and benefit information]

converting information in the system into a common format for processing by the central host computer;

analyzing the information in the system;

creating resulting analytical data;

converting the resulting analytical data into a format readable by a component of the system; and,

distributing the resulting analytical data to a component of the system.

Please add claims 33-36 as follows:

33. (NEW) The method of claim 32 wherein said analyzing step further includes the step of performing statistical analysis of the information such that resulting analytical data is suitable for use in a clinical research facility; wherein the clinical research facility is a component of the system; and wherein the clinical research facility further distributes the analytical data to at least one government agency.

34. (NEW) The method of claim 31 further comprising steps of: analyzing information collected by a component of the system; transmitting resulting analytical data to the central host computer; converting the resulting analytical data into a common format; storing the common format analytical data on the central host computer; converting the common format analytical data into a format usable by any component of the system; and distributing the converted analytical data to any component of the system.

35. (NEW) The method of claim 34 wherein said analyzing step is performed by a statistical module and wherein the statistical module uses analytical algorithms specific to the component of the system.

36. (NEW) The method of claim 32 further including a step of stripping the information of any data that might compromise anonymity of the individual from whom the information was collected.

REMARKS

Claims 1-7 and 22-32 have been amended, claims 8-21 have been canceled, and claims 33-36 have been added. Therefore, claims 1-7 and 22-36 are pending.

Claims 1-7 and 22-32 have been amended to more particularly point out the subject matter of applicant's invention and in response to the 35 U.S.C. §112, ¶2

rejection of the Office Action. Claim 1 has been amended to include the limitations in canceled claims 8-21.

Claims 1-32 stand rejected under 35 U.S.C. §112, ¶2. Claims 8-21 have been canceled, rendering this rejection moot. Claims 1, 2, 22, and 31 have been amended to respond to the issues raised by the Examiner in a self-evident manner.

Rejections Under 35 U.S.C. §103(a)

Claims 1-32 stand rejected under 35 U.S.C. §103(a) as being unpatentable over U.S. Patent No. 5,301,105 by Cummings (hereinafter "Cummings") in view of U.S. Patent No. 5,590,038 by Pitroda (hereinafter "Pitroda"). Applicant has amended Claim 1 to include original limitations of original claims 2-7 and canceled claims 8-21.

Claims 22 And 31 Are Amended To Eliminate Ambiguity Of The Term, "Portable Terminal" Thereby Distinctly Pointing Out A Novel Element Not Present In The Cited References, And Hence, Claims 22 and 31 Are Not Obvious and Patentable Over The Cited References

At Page 4, the Office Action acknowledges that Cummings fails to teach the use of a portable terminal, but states that "Pitroda teaches the use of a portable terminal in communication with said central host computer, wherein said portable terminal is operable to communicate with an entire system or any portion of said system, or is operable independently from said system (column 2, line 44 through column 3, line 33).

For clarity and to eliminate possible ambiguity, Applicant has amended Claims 22 and 31 to more distinctly point out the elements of Applicant's invention to include a provider terminal, which may or may not be portable, (hereinafter, a "portable provider terminal") and, a portable individual information device. The term, "portable terminal" has been removed from Claims 22 and 31 to preclude inappropriate comparison of the invention's portable provider terminal to a portable device having

limited functionality, such as the device taught by Pitroda. Although Applicant believes the basis for the above amendment is self-evident, Applicant provides additional detail herein to distinctly point out the differences between Applicant's "portable provider terminal" and Pitroda's device.

Applicant's inclusion of the term, portable terminal, has likely caused Pitroda's "universal electronic transaction card ("UET card") to be incorrectly characterized as having the equivalent functionality of a portable provider terminal. Properly characterized, Pitroda's UET card is simply one form of a portable individual information device described in Applicant's invention. Pitroda's UET card is not capable of providing equivalent functionality of Applicant's portable provider terminal.

Pitroda specifically describes the functionality of the UET card and fails to suggest that it would be independently operable, as is the portable provider terminal of Applicant's invention. Pitroda's UET card is functionally limited to processing of transactional information, and thus, is not fully independently operable.

For example, at column 2, rows 46-49, of Pitroda's patent, Pitroda teaches a universal electronic transaction card ("UET card") which is capable of storing, transmitting and receiving personal "transactional" information and thereby replacing plastic cards, which are presently used for the same purpose. This is a limited function that does not comport with the functionality of the Applicant's portable provider terminal.

Further, at column 2, rows 62-63, Pitroda indicates that the UET card is capable of "processing" transactional information. Applicant believes that the last Office Action mistakenly interpreted Pitroda's processing capability as equivalent to that of the portable provider terminal of Applicant's invention.

Analyzing Pitroda still further, at column 3, rows 50-51, Pitroda indicates the UET card is also provided with "processing means" for processing information. However, at column 4, row 50, we find that Pitroda describes the processing means and the information to be processed as directed to "personal information, account information, and transactional information."

Applicant's portable provider terminal includes capacity to perform fundamental statistical analysis of collected health care data. Contrarily, as shown, Pitroda's UET card is limited to minimal "transactional" processing capability.

Further, Applicant's portable provider terminal is operable to communicate with an entire system or any portion of said system or is operable independently from said system." Pitroda's UET card does not provide equivalent communicative functionality. At column 4, row 61, Pitroda teaches such communicative functionality only facilitated by a separate communications interface unit (CIU), connecting the UET card to a personal computer, where the personal computer processes information to produce electronic reports in the nature of monthly statements. Hence, as indicated, unlike Applicant's portable provider terminal, Pitroda's UET card is not fully independently operable from the system.

Hence, neither Cummings nor Pitroda teach the claimed feature, and it would not have been obvious for one skilled in the ordinary art to combine Pitroda and Cummings in the manner suggested by the Office Action to create the Applicant's invention. Pitroda's UET card could not operate independently from the system as suggest by the Office Action. Applicant contends that to suggest that Pitroda's UET card is operable independently from the system in a manner equivalent to Applicant's portable provider terminal would be a strained and incorrect comparison of the two elements. Hence, Applicant believes that the combination of Cummings and Pitroda does not set out all the claimed features of Applicant's invention. Thus, the rejection for obviousness is overcome and Applicant's claims 22 and 31 are of allowable merit.

Health Care Research Module And Service Support Module Not Suggested By The Prior Art; Inclusion Of A Health Care Research Module Or Service Support Module Decreases System User Friendliness

At Page 6, Paragraph 2, the Office Action acknowledges that both Cummings and Pitroda fail to teach both a health care research module and a service support

module, as described in Applicant's original claims 3-8 and 23. Although suggested by the Office Action that the health care research module is "old and well known in the art," the failure of industry to actually implement a fully integrated health care system including a research module such as that included in the Applicant invention argues strongly against such an assertion. Additionally, for one skilled in the art to extend Cummings to include use of a health care research module would require a multiplicity of separate, awkward combinative steps that are far too involved to be considered obvious.

Further, the Office Action's contention that it would have been obvious to implement the system of Cummings to use a health care research module and service support module presupposes that such modules exist and are available for integration with a system such as that described by Cummings. Applicant is unaware of any such modules available today that might be integrated with the system of Cummings.

Additionally, the Office Action's contention that such an implementation of a health care research module and service support module would have been motivated by a desire to create a "user friendly system" misinterprets the fundamental nature of such modules. A health care research module and service support module provide fundamental system functionality that may be used by those stakeholders involved with health care research or service support for an integrated health care system. The term, "user friendly system," is directed to a user's form of interaction with a computer system and suggests that a user may more easily use a specific software system.

In fact, the inclusion of a health care research module or a service support module in an integrated health care system would substantially detract from the user-friendliness of a system while still enhancing the system's overall functionality and value to the participants.

Consequently, Applicant respectfully submits that it would not have been obvious to one of ordinary skill in the art at the time Applicant's invention was made to implement the system of Cummings to use a health care research module and a

service support module. Further, Applicant submits that one skilled in the art would not have been motivated to extend Cummings to use a health care research module to provide a "user friendly system," but instead, one skilled in the art would be deterred from adding the complexity of a health care research module since it would actually detract from the overall user-friendliness of the system.

Consequently, Applicant submits that original claims 3-8 and 23 are of allowable merit, and the limitations associated with the original claims have been incorporated in amended claim 1, and hence, amended claim 1 is of allowable merit.

**Combination of Cummings with Pitroda to Provide Statistical Analysis
Software Module Inoperative; Statistical Software Module Actually Decreases
Efficiency And Reduces Overall User-Friendliness Of A System, Hence, One
Skilled in the Art Would Not Be Motivated To Include Such Capability**

In reference to original claims 9 and 24, at page 6, the Office Action acknowledges that Cummings fails to teach an integrated statistical analysis software package linked to said system for providing statistical analysis of said information stored in said system. However, the Office Action strains to suggest that Pitroda teaches an integrated statistical analysis software package linked to said system for providing statistical analysis of said information stored in said system. In fact, at column 12, lines 7-16, Pitroda explicitly states that the UET card only includes "analysis algorithms and procedures." The referenced "analysis algorithms and procedures" do not suggest any form of statistical analysis. Instead, the "analysis algorithms and procedures" of Pitroda are directed to supporting the storage, transmission and reception of personal and account information in the memory of Pitroda's UET card. Extrapolating Pitroda's UET card's capability to perform simplistic, basic transactional processing to suggest equivalence with the sophisticated statistical analysis of Applicant's invention is an inappropriate comparison. Pitroda's UET card would have been incapable of performing statistical analysis. Applicant has found no other reference within Pitroda that suggests a

capability to perform statistical analysis. Again, Pitroda's UET card is simply one form of an individual information device as described in Applicant's invention. Pitroda's UET card would have been incapable of performing the computational process required for the statistical analysis of the information contained within Cumming's integrated system.

At page 7, the Office Action further contends that one of ordinary skill in the art would have been motivated to implement the system of Cummings to use an integrated statistical analysis software package for providing statistical analysis of information stored in the system simply because it provided a "more efficient and user friendly system". Contrarily, Applicant strongly contends that the inclusion of such a statistical analysis software package would in fact detract from the overall efficiency and user friendliness of a system. Statistical analysis capability would burden the overall system capabilities, including the memory requirements and processor requirements. Further, inclusion of a statistical analysis capability does not enhance efficiency of the system. Instead, inclusion of statistical analysis capability provides additional information and data which may be used by a participant, such as a research participant or service provider, to assess the variables associated with the operation of such a system in order to improve quality of research or enhance quality of care.

The results of such statistical analysis may suggest the adoption of additional healthcare procedures or practices by a health care services provider that enhance the quality of patient care, but would most certainly actually detract from the overall efficiency of the system. For example, statistics might suggest that a particular preemptive surgical procedure or diagnostic test has proven successful in identifying a particular disease or condition at an early stage, thereby increasing the likelihood of successful curative treatment. Hence, albeit fewer individuals may die from the disease or condition, the efficiency of the overall integrated health care system decreases since a much larger patient population may now receive the additional preemptive surgical procedures or diagnostic tests to minimize mortality rate. If subsequent statistics indicate a further reduction in mortality rate from the particular

disease or condition, a larger patient population will likely be treated with the preemptive surgical procedure or diagnostic test.

As suggested by the above discussion, inclusion of statistical analysis capability does not provide a more user-friendly system; instead, it provides a more functional system with substantially increased complexity. The effort, skill and ingenuity required to extend Cummings to incorporate or use such statistical analysis capability, and the failure of industry to currently provide such statistical analysis capability as a cohesive segment of an integrated health care system, mitigates against a conclusion that it would have been obvious or possible for one of ordinary skill in the art to implement Cummings with such statistical analysis capability.

Inasmuch that the limitations of canceled Claim 9 have been incorporated in amended claim 1, and claim 24 has been amended to provide that the statistical analysis software module is integrated in Applicant's system, Applicant submits that both amended claim 1 and amended claim 24 are of allowable merit and the rejection for obviousness is overcome.

Applicant's Invention Provides Access, Conversion, Processing And Comparative Statistical Analysis Of Government And Benefit Information, Whereas Cummings And Pitroda Only Implicitly Suggest Access To Such Information

In reference to original claims 21, 30 and 32, at page 8, the Office Action contends that a system which provides "access" to any of Social Security, annuity and retirement account is old and well known in the art. However, the Office Action also contrarily acknowledges that both Cummings and Pitroda "fail to explicitly teach" a system which provides such access. Further, none of the references cited by the Office Action suggest that such access to government information is "old and well known in the art." In fact, it is probably better known within the health care industry that there have been a plurality of failures to actually meaningfully access such disparate data. Additionally, given the disparate nature of the Social Security, annuity and retirement account information, one of ordinary skill in the art would not

have been motivated to modify the system of Cummings to include a system which provides such access simply because it provides "more information which leads to a more comprehensive health care system." Further, the provision of access to such data without the ability to process such data is of little use.

The inclusion of disparate and incompatible information within a single integrated, yet distributed, data system frequently requires the employment of novel and inventive system elements and procedures to ensure that the generally incompatible elements of a system might be operationally mediated to allow streamlined interaction. Applicant's invention first serves to conform disparate data, such as government information, such that Applicant's system may perform various analyses of the data, including statistical analysis.. Applicant's invention converts the data so that it might be processed by the system to provide a complete health care picture to any user of Applicant's system. Applicant is unaware of any such system which provides the described functionality.

Consequently, Applicant submits that independent Claim 1, as amended to include the limitations of canceled Claim 21 and original Claim 32, and, Claim 30, as amended to include comparative statistical analysis of Social Security, retirement account and benefit information, overcome the rejection for obviousness based upon the above considerations, and hence, are of allowable merit.

Accordingly, Applicant submits that the dependent claims are a fortiori patentable and should also be allowed.

The Dependent Claims Are A Fortiori Patentable Over Cummings And Pitroda

Amended dependent claims 2-7 incorporate all the subject matter of claim 1 and add additional subject matter which makes them a fortiori and independently patentable over the cited references.

Amended claim 2 adds that the "hardware, software and firmware components" of Applicant's system will use "open standards." Neither Cummings, Pitroda or the other cited references include this limitation.

Amended claim 3 adds that the "health care research module converts said health care data ... into one common format." Again, neither Cummings, Pitroda or the other cited references provide or suggest this capability.

Amended claim 4 adds that the health care research module strips identifying data from collected health care data to preserve anonymity where necessary. Again, neither Cummings, Pitroda or the other cited references provide or even suggest this capability.

Amended claim 5 adds the inclusion of a statistical analysis module to the capability described in amended claim 3. Again, neither Cummings, Pitroda or the other cited references provide this capability.

Amended claim 6 recites the inclusion of a card reader in Applicant's system to allow the portable individual information device to be accessed.

Amended claim 7 provides that Applicant's provider terminal may communicate with any element of Applicant's system, or, operate independently. Pitroda's UET card could only communicate with a system via a communications interface unit.

Amended dependent claims 23 – 30 incorporate all the subject matter of amended independent claim 22 and add additional subject matter which makes them a fortiori and independently patentable over the cited references.

Amended claim 23 adds a function for maintenance of service provider records, to include information regarding disciplinary actions against health care service providers. Neither Cummings, Pitroda or the other cited references provide this capability.

Amended claims 24 –28 add billing, insurance benefits, payment and authorization modules to Applicant's system, to provide a fully integrated and comprehensive health care system.

Amended claim 29 provides for different centralized host computer configurations.

Amended claim 30 recites capability to both access and analyze Social Security, retirement account and benefit information.

Amended dependent claims 32 and new dependent claims 33 – 36 incorporate all the subject matter of amended independent claim 31 and add additional subject matter which makes them a fortiori and independently patentable over the cited references.

Amended claim 32 and new claims 33 – 35 recite additional steps for converting system information into a common format to allow analysis and later distribution of resulting analytical data. Neither Cummings nor Pitroda nor the other cited references describe such capability.

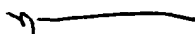
New claim 36 adds a step to include stripping of identifying information from the health care data to preserve anonymity. Again, neither Cummings nor Pitroda nor the other cited references describe such capability.

Conclusion

In view of the foregoing, the Applicant believes that, upon entry of this Amendment, all claims pending in this Application will be in condition for allowance. The Applicant respectfully requests consideration of all claims and the issuance of a Notice of Allowance at an early date.

If the Examiner believes a telephone conference would expedite prosecution of this Application, please telephone the undersigned at 650-851-7138.

Respectfully Submitted,



Michael A. Glenn
Reg. No. 30, 176



COPY

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: JOHNSON

Atty. Docket No: JJOH0001

Application No.: ~~08/968,755~~ 08/960,755

Examiner: H. Kazimi

Filed: October 29, 1997

Art Unit: 2765

For: METHOD AND SYSTEM FOR CONSOLIDATING AND
DISTRIBUTING INFORMATION

REQUEST FOR EXTENSION OF TIME - 3 MONTH

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Pursuant to 37 CFR § 1.136, Applicant requests that the term for Response in the above entitled patent application be extended for 3 months, until August 19, 1999. The Commissioner is authorized to charge the amount of \$ 435.00 as payment for such extension pursuant to 37 CFR § 1.17(a) and any additional fees or credit any overpayment to Deposit Account No. 07-1445 (Order No. JJOH0001). A copy of this sheet is enclosed for accounting purposes.

Respectfully submitted,



Michael A. Glenn
Reg. No. 30,176
Attorney for Applicant

125 Lake Road
Portola Valley, CA 94028
(650) 851-7138

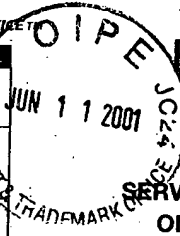
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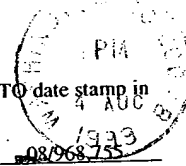
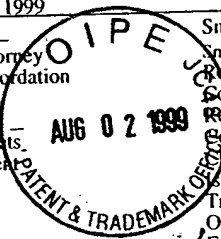
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June 7, 2001
via Facsimile
703.308.6296

Examiner Hani Kazimi
United States Patent and Trademark Office
Washington, DC 20231-0001

REF: In re Application of Johnson
Application No. 08/960,755 Filed October 29, 1997
For: METHOD AND SYSTEM FOR CONSOLIDATING AND DISTRIBUTING
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Our Docket No. JJOH0001

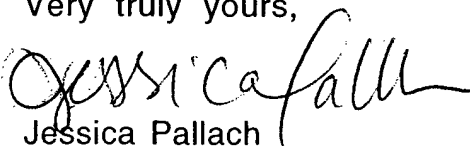
Dear Examiner Kazimi,

Pursuant to our telephone conversation of today, I am sending you proof that the amendment was timely filed, including the post marked express mail receipt number EL441835164US dated 2 August 1999, along with the PTO Acknowledgement postcard dated 2 August 1999.

This case went abandoned due to our clerical error. The Application Number was erroneously typed as 08/96~~8~~,755. The Application number is 08/96~~0~~,755.

Thank you for reviewing this with your Supervisor. We await your instructions for reviving this case.

Very truly yours,


Jessica Pallach
Patent Administrator

Glenn Patent Group
3475 Edison Way, Suite L
Menlo Park, CA 94025

Tel 650 474 8400
Fax 650 474 8401
glenn-law.com

G|P|G

June 7, 2001
via Facsimile
703.308.6296

Examiner Hani Kazimi
United States Patent and Trademark Office
Washington, DC 20231-0001

REF: In re Application of Johnson
Application No. 08/960,755 Filed October 29, 1997
For: METHOD AND SYSTEM FOR CONSOLIDATING AND DISTRIBUTING
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Our Docket No. JJOH0001

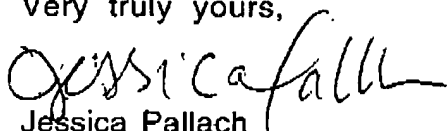
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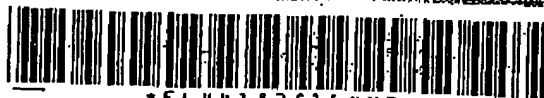
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☒ Petition for Extension of Time- 3 mo.

